BEST AVALABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10002149

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			2 18					RATE FEE		- · · ·	RATE	FEE	
FO	R	-	NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	74	0.00
то	TAL CHARGEA	BLE CLAIMS	minus 20=		* &-			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			<u></u> minus 3 =		* &			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							,	TOTAL		OR	TOTAL	7	46-
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
		(Column 1) CLAIMS		(Colu	mn 2) IEST	(Column 3)	<u>mn 3)</u> r	SWALL		UN I	SWALL	_	
AMENDMENT A		REMAINING NUMBE AFTER PREVIOU AMENDMENT PAID FO		OUSLY	PRESENT EXTRA	-	RATE	ADDI- TIONAL FEE		RATE	TIC	DDI- DNAL EE	
	Total	* 19	Minus	** 2	0	=		X\$ 9=		OR	X\$18=	7	
AME	Independent	* 2	Minus	***	<u>3</u>	=	1	X42=		OR	X84=	Π	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM		J	+140=		OR	+280=		
			TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE							
		(Column 1))_	ADDII. FEE I		•	ADDII: 1 EE					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	NUM PREVI		HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIC	DDI- DNAL EEE
	Total	* 17	Minus	**~2(2	=	▋▐	X\$ 9=		OR	X\$18=		<u> </u>
	Independent	* 3	Minus	***	3 TCLAIM	=	┦┆	X42=		OR	X84=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
		•	TOTAL ADDIT. FEE	(OR	TOTAL ADDIT. FEE	Ļ	·					
		(Column 1)	<u>)</u>					•					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIC	DDI- DNAL EEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Indep ndent	*	Minus	***	_	=-		X42=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDEN		CLAIM] [┨	
	If the entry in colum	mn 1 ie laas than t	ha anthuin act	ma 2 umit	e "O" in co	dumn 3		+140=		OR	+280=	<u> </u>	
**	If the "Highest Nu	mn 1 is less than t mber Previously P mber Previously F	aid For" IN THI	S SPACE	is less tha	ın 20, enter "20		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		mber Previously Pa ber Previously Pa						and in the app	propriate box	c in co	olumn 1.		,